

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

2007

1131

Lobbyist's Registration Number

Instructions

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME MARRETTA GEORGE J.
Last First MI2. BUSINESS PHONE 225-344-5001
Area Code and Phone Number3. BUSINESS ADDRESS 700 N. 10th Street Baton Rouge, LA 70802
Street and No. City State ZipMAILING ADDRESS P.O. Box 4327 Baton Rouge, LA 70821
Street and No. City State Zip4. EMPLOYER Louisiana Municipal Association5. EMPLOYER'S ADDRESS 700 N. 10th Street Baton Rouge, LA 70802
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Louisiana Municipal AssociationAddress 700 N. 10th Street Baton Rouge, LA 70802Business or purpose Non-profit organization providing services to municipal governmentsDoes this person pay you? Yes

If No, who pays you? _____

FOR OFFICE USE ONLYPostmark Date: 12-15-06

Ren 2007

#13524

#110

Wm

2006 DEC 18 PM 12:54

REGISTRATION
FINANCE
CAMPAIGN
RECEIVED

1061036

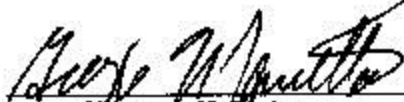
LOBBYING REGISTRATION FORM

1131
Lobbyist's Registration Number

2. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
3. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
4. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by the Lobbyist Disclosure Act [L.S.A.-R.S. 24:50 et seq.] has been deliberately omitted.


Signature of Lobbyist

ATTACH
2" x 2"
PHOTOGRAPH
HERE
FOR
INITIAL
REGISTRATION
ONLY